

MISSOURI DEPARTMENT OF MENTAL HEALTH

Division of Comprehensive Psychiatric Services

OFFICIAL MEMORANDUM

March 15, 2005

TO: All CPS Administrative Agents

FROM: Tom Rehak, Coordinator of Policy and Programs
Division of Comprehensive Psychiatric Services

SUBJECT: Medicaid Administrative Case Management - Outreach

This is to provide you with information regarding billing the POS service of Medicaid Administrative Case Management – Outreach.

You may bill this service effective immediately, and retroactive back to January 1, 2005. The following are the service codes which you should have on your POS contracts.

Service Codes

01100H – Bachelors degree

01102H - QMHP

01103H - Psychologist

01104H – Advance practice nurse

If you do not have these codes on your main CPS contract please notify me.

The following are the three target populations this service is intended for and information regarding billing and documentation:

1. Persons hospitalized at psychiatric inpatient facilities

All time spent reviewing inpatient admissions with inpatient staff and working with staff and consumers on discharge planning may be billed. This includes travel time to and from the facility, direct contact with facility staff and consumers, and phone contact.

Services may be documented by a log which identifies your staff person, the total time spent, a brief description of the activity, and the consumers involved. Services may be billed client specific if the individual is already an active client with the administrative agent, or may be billed under a non-client ID number if they are not in service.

2. Persons not currently involved in community services

Time spent going to community locations to find, engage, and assess person for service needs may be billed, including homeless shelters, drop-in centers, etc. Travel time and direct time may be billed.

Services may be documented by a log which identifies your staff person, the total time spent, a brief description of the activity, and the persons involved. Services are billed under a non-client ID number.

3. Persons currently enrolled in CPR who become non-compliant and are at risk of dropping out and discontinuing services

Time spent finding non-compliant consumers, assessing them and engaging them to accept services are all billable activities. Travel time, phone time, and direct contact may be billed.

- These consumers should be in need of outreach due to non-compliance, missing appointments, and refusal to participate in services designated on the treatment plan. Prior to providing and billing for Outreach to this particular population, routine attempts to contact the consumer and address the non-compliance should have been made and documented in the clinical record
- A QMHP should sign off on the need for Outreach with a brief progress note in the clinical record
- While Outreach is being provided, all activities for the identified client by the community support worker should be billed to this service. Community Support may not be billed while the Outreach service is being provided.

Services are documented in the client chart with a progress note with the usual components, and billed under the consumers ID number.

We encourage you to use this new POS service wherever appropriate. Just like with the Intake Screening service, we will be generating a quarterly invoice to Medicaid for the units of service that are paid through the POS system, and receiving a 50% federal reimbursement, which will then be allocated back to providers on the basis of who earned it.

If you have any questions please feel free to contact me.

cc: Dora Cole
CPS Policy Staff
Kathy Carter